

IN THE UNITED STATES PATENT AND TRADEMARK OFFICERECEIVED
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APPLICANT:	ELIZABETH ANN BEAMON, ET AL.)
SERIAL NO.:	09/726,637) Art Unit:
) 2643
)
FILED:	November 30, 2000) Examiner:
) Rexford N. Barnie
)
FOR:	DIGITAL LOOP CARRIER MODULE) Confirmation No.:
	FOR PROACTIVE MAINTENANCE) 2089
	APPLICATION)

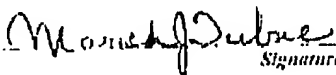
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Commissioner for Patents
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Alexandria, VA 22313-1450

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RESPONSE TO FINAL OFFICE ACTION

Applicants respectfully request entry of the following amendment and remarks contained herein in response to the Final Office Action mailed on December 2, 2004. Applicants respectfully submit that the amendment and remarks contained herein place the instant application in condition for allowance.

00252 / 111.1-0084

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 00252 / BIL-0084	
Applicant(s): Elizabeth Ann Beamon, et al.						
Application No. 09/726,637	Filing Date 11/30/2000	Examiner Rexford N. Rarnie	Customer No. 36192	Group Art Unit 2643	Confirmation No. 2989	
Invention: DIGITAL LOOP CARRIER MODULE FOR PROACTIVE MAINTENANCE APPLICATION						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	20 -	22 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Marisa J. Dubue Registration No: 46,673 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 Phone: 860-286-2929 Fax: 860-286-0115			Dated: March 2, 2005			
CC:			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ <div style="text-align: center;">(Date)</div> <div style="text-align: center;">_____ Signature of Person Mailing Correspondence</div> <div style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</div>			